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Weekly Bulletin



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GUY P. JONES
EDITOR

Of Interest to Parents.

In this issue of the Weekly Bulletin there is published an article entitled "The Hygiene of the School Child at Home," by Dr. A. J. Scott, Jr., of Los Angeles, member of the California State Board of Health. This paper was presented by Dr. Scott at the Conference of Social Work held in San Diego, April 25th to 28th. Dr. Scott emphasizes the necessity of following the rules of simple hygiene and offers simple and practical suggestions for observing the rules of hygiene with relation to the child at home.



No, Not "Sanitarians."

The term "public health worker" has been used for many years to include all individuals employed professionally in public health work. The term is awkward and is also without specific meaning. Realizing the need for a more comprehensive term, the "Conference on the Future of Public Health in the United States and the Education of Sanitarians," held in Washington March 14 and 15, chose the word "sanitarian" for the designation of all public health workers. The choice of this word is unhappy, to say the least. During the war this term was used extensively for the purpose of designating special workers in the many bureaus of venereal disease that sprang up all over the country. For this reason it will be difficult for the general public to disassociate the term from venereal disease control. Besides, in many places, sanitary inspectors are called sanitarians.

In spite of the definition of sanitarian in the Century Dictionary, "a promotor of, or one versed in, sanitary measures and reforms," it would seem that, because of previous usage, the term can not

be used successfully in the designation of all persons engaged professionally in public health work. The Journal of the American Public Health Association states that it is in sympathy with the new usage of the word and intends to follow it in its own style. We are willing to struggle along with "public health worker," however, waiting until such time as a more comprehensive term than "sanitarian" may be invented.



A Sick Man's Journeys.

The Detroit City Department of Health has published a history of the travels of a tuberculosis patient which is typical of the journeys of many migratory patients who find their way into California. The Detroit health officer calls it "the story of the sick man that hurts the cause of the sick."

"He was admitted to the tuberculosis ward of the hospital in 1918," the story reads. "He stayed several months and then left without permission. He found it more to his liking to enlist the sympathy and financial support of private individuals. He asked for money to take him West so he could be cured of tuberculosis. He got it—got it many times, and he abused the kindness of the people who helped him.

Individualistic philanthropy did this since 1918:

It sent him to Colorado and return three times;
It sent him to Illinois and return three times;
It sent him to Minnesota once, and to Iowa once;
It helped him into Eloise, Herman Kiefer and the Detroit Tuberculosis Sanitarium about ten different times;

Last year Detroit business men gave him \$468 in three months.

The last we knew he had a letter from a physician stating that the bearer had tuberculosis and, if given financial assistance, would go to the West to live."

Detroit now has a clearing house in its Department of Public Welfare, by means of which such imposition upon its citizens and upon the residents of western states may be eliminated. Team play in community relief is valuable and necessary.



THE HYGIENE OF THE SCHOOL CHILD AT HOME.

By A. J. SCOTT, JR., M.D., Los Angeles.
(Professor of Diseases of Children, College of Medical Evangelists, Los Angeles, Member of California State Board of Health.)

Foreword: We have spent much time and money in the development of child welfare stations. Study and care of the preschool age child is becoming more popular while study and attention are also being given to the child in school. But, what of this same child out of school hours?

The pediatrician sees many of these children in his capacity as consultant to the family, or the child is brought to him upon the request of the school nurse or teacher because the child is not doing as well as he should in school.

A careful history, inquiring into the minute details of the child's life from birth up to the present, often reveals some simple fault which when corrected makes for a change in the whole quality of work done at school. The following are some fundamental principles based upon the same work being done in the preschool age period, and partly upon the work of school physicians. The facts are not advanced as original, but are merely to emphasize again their importance.

A healthy body is absolutely necessary as a basis upon which to build the superstructure and may be attained by attention to details in the following:

Food: See that there are sufficient of the essential elements, protein for repair of waste and to build up new tissue, fat to pad the bones, muscles, and nerves as well as to prevent injury, carbohydrates for fuel, mineral salts from green vegetables and well ripened fruits, vitamins from the leafy vegetables, citrus fruits and milk. Limit sweets until the end of the meal and feed nothing between meals except fresh fruits. Further discussion will take us too far afield, but all of these principles can be taught in the home by being started in the school. It

is a simple matter to instill into young children a realization of the necessity of drinking plenty of fresh milk, etc. The body needs plenty of coarse foods as found in fruits, vegetables and coarse breads.

Bowel Action must be a daily affair. Too often this important matter is not attended to unless the mother makes it a point to send the child to the toilet immediately after breakfast. She must insist on the child trying and results are possible if persistence is exercised. This one fact is so often neglected, that the child is stupid and sluggish in school.

Water: Drinking of plenty of cool water is another neglected habit. This is necessary to obtain proper metabolism, for without water constipation is always quite severe. From 4 to 8 glasses a day are necessary, depending upon the age of the child. Have a cooler and glass handy for between times, while playing. Insist upon a big drink in the morning on arising and after each meal. It is not well to drink with meals, for this tends to make easy the washing down of poorly masticated food.

Fresh Air: This is essential to proper oxidation. Bed rooms, frequently have not good ventilation, or while there may be plenty of windows and doors the child's bed is pushed off into one corner, where the air is stale. The child re-breathes the heavy air and the result is improper oxidation. Such children will be restless at night. Get the bed out into the room and arrange so there will be no draught, but so that there will be constantly moving air. A screen properly adjusted to the head of the bed or on one side will effect good results, or place the child so the head comes to the foot of the bed and pull the bed out from the wall. A sleeping porch is the ideal arrangement.

Rest: Frequently school children are kept up until the adults go to bed. A child's body and mind are weary after the strenuous life of school and play and need from 9 to 11 hours sleep every night. Until he is 12 years old he should be in bed by 8 p.m. and up at 6 or 7 a.m. Possible exception might be made occasionally for special reasons. But to get the best results, the early hours are necessary. For the child from 6 to 9 or even 10 years of age a rest period of from $\frac{1}{2}$ to 1 hour after coming home from school in the afternoon will give quieter nerves and a more amiable disposition. The child can really enjoy play more if the nervous tension is relaxed somewhat first. Use a cool, darkened or shaded room with plenty of air. For the older children sometimes a doll or story or picture book will help to

make the rest hour more pleasant and not make it seem a punishment. This hour is very essential particularly in the slender, highly strung, nervous youngster.

Baths: The body needs water externally as well as internally to open the pores and aid in elimination. A daily bath does not weaken any person if properly used. For the average child a tepid tub on retiring is sufficient. In very hot weather, with a strong child, a cool splash on arising with a brisk rub afterward to make the skin pink, will freshen and invigorate for the heat of the day. If, however, a child seems weak or exhausted after either of the above types of bathing a sponge bath should be substituted until its resistance is built up. The nightly bath also helps to relax tired nerves and muscles and promotes a quieter sleep.

Clothing: This should be adjusted to the climate and type of child. In cool weather, dry or damp, the lower part of the body needs as much protection as the upper. A good quality of underwear, heavy stockings full length and stout, thick-soled shoes will keep the feet, legs and buttocks warm and dry. Additional overcoats or sweaters will take care of the torso and arms. But to have a child dressed in half sox and thin-soled shoes and underwear while the mother wears a heavy coat and furs seems somewhat inconsistent to say the least. The child's metabolism is more active than the adult's but there is too much demand on the child's system to care for the growth and normal wear and tear, to supply extra heat to keep the body warm when this could be done by extra clothing.

The too-frequent head colds or symptoms of congested upper respiratory mucus membranes are some of the results of this type. The so-called "hardening the body" by such means is a fallacy. Instance how nature provides heavier furs for animals and feathers for birds in the colder times of the year. Nature is not so kind to the human. He is provided with a sentient parent whose thought is more for style than health.

Exercise: This is as much a part of the normal child's life as food and sleep. He craves it and if he does not get it in one way he will in another, so, skates, turning bars, swings, and all the rest of the paraphernalia which go to make up the necessary outfit should be provided at home as well as at school. If a child does not have these at home he seeks the homes of others who do have them. They should not be used to the point of exhaustion. The average child sits

down very frequently for rest if only for a few minutes but enough to "get his breath" which is equivalent to the same thing. Children of the early school period should not be allowed to walk many blocks without frequent pauses to rest. Too often adults will walk a young child to the point of exhaustion. For the older children hikes are very valuable when possible.

Physical Defects: Wherever there are any physical defects which tend to interfere with proper functioning of all organs these should be corrected. The eyes should receive consideration where the teacher notes inattention or making of frequent mistakes, where the child complains of nausea especially in the morning or where there is any distaste for food, poor or fickle appetite. Tonsils and adenoids and teeth should come in for their share of attention. Parents should not neglect the advice of school nurses and physicians as this is all for the child's welfare not only in school but at home. Here again, there should be close cooperation between teachers and parents.



If a man's mind, courage and interest can be enlisted in the cause of his own salvation, healing goes on apace, the sufferer is remade. If not, no medical surgeon, no careful nursing will avail to make a man of him again.—John Galsworthy.



"We are in the United States spending more money on convicting and imprisoning two men who go wrong out of each 100 of population than we are on educating the other ninety-eight."—Warden James A. Johnston of San Quentin.



I have hope and wish that the nobler sort of physicians will advance their thoughts, and not employ their time wholly in the sordidness of cures; neither be honored for necessity only; but that they will become coadjutors and instruments of the divine omnipotence and clemency in prolonging and renewing the life of man.—Bacon.



What shall it profit a child if it gain an education but has no health? The greatest thing in the world is human life. The physically unfit, the pale, the frail, stoop-shouldered child can never be depended upon to stand up to the hardships of life's competition. Our schools are largely responsible for their development or the lack of it.



Venereal disease is the most prevalent of all diseases except measles, is responsible for 6000 of the blind in the United States, is the cause of 75 per cent of surgical operations on female pelvis, is the cause of 20 per cent of insanity, is the cause of nearly half of the miscarriages, is the principal cause of locomotor ataxia, is the frequent cause of many other diseases—rheumatism, apoplexy, etc.—Connecticut Health Bulletin.

MORBIDITY.

Smallpox.

Of the 34 cases of smallpox reported last week, 10 were in San Jose and Santa Clara County, 5 in Alameda County, 4 in Hayward, 3 in Merced, 2 in Stanislaus County and 1 case each in Los Angeles, Watsonville, San Francisco, Fresno County, San Luis Obispo, Bakersfield, Taft, Lodi, Richmond and Sacramento.

Typhoid.

Of the 10 cases of typhoid reported last week, 2 were in Fresno County and 1 case each in Sacramento County, Santa Clara County, Los Angeles, San Francisco, Santa Ana, Colton, Berkeley and El Cerrito.

Meningitis (Epidemic Cerebrospinal).

Four cases of this disease were reported last week—1 case each in San Joaquin County, Tulare County, Pomona and San Francisco.

Encephalitis (Epidemic).

Five cases of epidemic encephalitis were reported for the week ending May 5th. There was 1 case each in Oakland, Los Angeles, San Francisco, Modesto and Colton.

Leprosy.

Los Angeles reported 1 case of leprosy last week.

Epidemic Jaundice.

One case of epidemic jaundice was reported in Nevada City last week.

LIST OF DISEASES REPORTABLE BY LAW.

ANTHRAX	MEASLES
BERI-BERI	MUMPS
BOTULISM	OPHTHALMIA NEONATORUM
CEREBROSPINAL MENINGITIS (Epidemic)	PARATYPHOID FEVER
CHICKENPOX	PELLAGRA
CHOLERA, ASIATIC	PLAQUE
DENGUE	PNEUMONIA
DIPHTHERIA	POLIOMYELITIS
DYSENTERY	RABIES
ENCEPHALITIS (Epidemic)	ROCKY MOUNTAIN SPOTTED (or Tick) FEVER
ERYSIPelas	SCARLET FEVER
FLUKES	SMALLPOX
FOOD POISONING	SYPHILIS*
GERMAN MEASLES	TETANUS
GLANDERS	TRACHOMA
GONOCOCCUS INFECTION*	TUBERCULOSIS
HOOKWORM	TYPHOID FEVER
INFLUENZA	TYPHUS FEVER
LEPROSY	WHOOPING COUGH
MALARIA	YELLOW FEVER

*Reported by office number. Name and address not required.

QUARANTINABLE DISEASES.

CEREBROSPINAL MENINGITIS (Epidemic)	POLIOMYELITIS
CHOLERA, ASIATIC	SCARLET FEVER
DIPHTHERIA	SMALLPOX
ENCEPHALITIS (Epidemic)	TYPHOID FEVER
LEPROSY	TYPHUS FEVER
PLAQUE	YELLOW FEVER

Section 16, Public Health Act. All physicians, nurses, clergymen, attendants, owners, proprietors, managers, employees, and persons living in or visiting any sick person in any hotel, lodging house, house, building, office, structure, or other place where any person shall be ill of any infectious, contagious, or communicable disease, shall promptly report such fact to the county, city and county, city, or other local health board or health officer, together with the name of the person, if known, and place where such person is confined, and nature of the disease, if known.

COMMUNICABLE DISEASE REPORTS.

Disease	1922			Reports for week ending May 6 received by May 9	1921			Reports for week ending May 7 received by May 11		
	Week ending		Apr. 29		Week ending		Apr. 30			
	Apr. 15	Apr. 22			Apr. 16	Apr. 23				
Anthrax	0	0	0	0	1	0	0	0		
Cerebrospinal meningitis	0	3	2	4	6	4	2	2		
Chickenpox	118	127	176	120	230	142	191	188		
Diphtheria	134	119	123	108	136	200	148	127		
Dysentery (bacillary)	0	0	6	5	2	5	4	8		
Epidemic encephalitis	3	0	2	5	4	5	0	2		
Gonorrhoea	55	127	63	106	60	45	94	137		
Hookworm	1	0	0	0	0	0	0	0		
Influenza	169	157	120	66	111	110	82	33		
Leprosy	0	1	0	1	0	0	0	0		
Malaria	1	1	0	3	2	2	5	5		
Measles	32	19	29	13	610	564	515	427		
Mumps	76	86	78	49	239	248	228	227		
Pneumonia	96	171	111	102	78	127	62	82		
Poliomyelitis	1	1	1	0	0	2	0	3		
Rabies	0	1	0	0	0	0	0	0		
Scarlet fever	103	94	118	76	123	126	127	84		
Smallpox	46	23	62	34	109	135	117	109		
Syphilis	80	95	89	95	42	43	39	139		
Tuberculosis	149	195	216	129	150	139	174	172		
Typhoid fever	10	5	10	10	7	7	13	8		
Whooping cough	59	83	78	102	67	86	105	74		